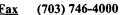
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450



or Fax

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appropriate. All further comindicated unless corrected be maintenance fee notification	elow or directed otherwise	atent, advance orders and in Block 1, by (a) specifying	notification of maintenaing a new corresponden	ance fees will be ma ce address; and/or (b	iled to the current o) indicating a sep	correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE 22195 75	Fee(s) Tran papers. Eac	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
		JAN 0 7 2015	I hereby ce States Posta addressed t transmitted	Certificate or rtify that this Fee(s) al Service with suffice to the Mail Stop IS to the USPTO (703)	Mailing or Tran Transmittal is bein ient postage for fit SUE FEE address 746-4000, on the	smission  g deposited with the United  rst class mail in an envelope  above, or being facsimile date indicated below.
/10/2005 GWORDOF2 0000	0145 083425 1004157	4 TRADEME	<i>y</i>			(Depositor's name)
FC:1501 1400.00		(Signature)				
FC:1504 300.00 FC:8001 9.00	DA			<u> </u>		(Date)
APPLICATION NO.			FIRST NAMED INVENTOR		IEY DOCKET NO.	CONFIRMATION NO.
10/041,574 10 dies to			Jian Ni PF375		F375P1D1	7011
TITLE OF INVENTION: HI	UMAN TUMOR NECROSI	S FACTOR RECEPTOR T	R9			·
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION	FEE TOTA	L FEE(S) DUE	DATE DUE
nonprovisional	NO	\$ <del>1370-</del> \$1400	\$300		\$1 <del>670</del> \$1700	02/16/2005
EXAMINER		ART UNIT	CLASS-SUBCL	LASS-SUBCLASS		
O HARA, I	1646	424-13910	424-139100			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless			4 ,1 ,	f an assignee is iden	tified below, the o	document has been filed for
recordation as set forth in	37 CFR 3.11. Completion of	of this form is NOT a substit	tute for filing an assignment	nent.		document has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
HUMAN GENOME SCIENCES, INC. Rockville, MD						
Please check the appropriate	assignee category or categor	ries (will not be printed on t	he patent): 🖵 Individ	lual KCorporation	or other private gr	oup entity Government
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):						
Issue Fee  A check in the amount of the fee(s) is enclosed.						
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies3  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-3425 (enclose an extra copy of this form).						
			Account Number 08-	3425	(enclose an extra c	copy of this form).
5. Change in Entity Status  a. Applicant claims SM	(from status indicated above MALL ENTITY status. See	,	oplicant is no longer clair	ming SMALL ENTIT	'Y status. See 37 C	FR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (A required) wards of the United States Pate	e Fee and Publication Fee ( vill not be accepted from an or and Trademark Office.	if any) or to re-apply an yone other than the appli	y previously paid issucant; a registered atto	ne fee to the application or to agent; or t	ation identified above. he assignee or other party in
Authorized Signature			Date January 7, 2005			
Typed or printed name Kenley K. Hoover Registration No. 40,302						

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